

**CLAIMS ONLY**

Application Number:

"Filing Date

~~1077~~  
Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments					
	Indep.	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18	1						68					
19							69					
20		1					70					
21			1				71					
22				1			72					
23	1						73					
24				1			74					
25					1		75					
26						1	76					
27							77					
28							78					
29	1						79					
30					1		80					
31							81					
32		1					82					
33			1				83					
34	1						84					
35				1			85					
36					1		86					
37						1	87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	4						Total Indep					
Total Depend	6						Total Depend					
Total Claims	23						Total Claims					